EXHIBIT B

Wire Transfer Outgoing Request



Wire Transfer Sender Inforr	nation		No. of Contract Contr				
Sender Name;		, I DOCAL PASSACCIONS ON TAXABLE PASSACCIONS	GERENAGONES ANTONIOS DO ARRANDO UN TITO				
THOMAS A SENSEL							
Account Name; ALLMINE INC,	Street Address: 9121 WASHINGTON TRACE RD						
City:		Zip:	[Country:	 	Daytime Phone:		
CALIFORNIA	KY	41007-9093	USA		310-430-8567		
Primary ID Type:	ID Issuer:	D.Alumber:	ID Issue (Date:	ID Exp:		
Passport w/Photo	USA		03/27/2	015	03/23/2025		
Secondary ID Type:	ID Issuer:	וטאיטון שון womoer.	ID Issue ()ate:	ID Exp:		
Chase or Bank issued Credit/Debit C Comments:	ard Chase	XXXXXXXXXXXXX	107	06/30			
Wire Transfer Information			With the second				
Request Date:	Request time:	Effective date:					
06/13/2018 Debit Account #:	02:38:12PM Eastern time Debit Account Type:	06/13/2018 Available balance:	Woman	Domestic Wire Amount	e Amount (US dollars):		
Debit Account in	PLAT BUS CHECKING	\$215,672.02		\$215,000.00			
Qualifying Account #:	Qualifying Account Type:	Source of funds:	1				
qualitying recount it.	dominiting account the	Checking		Wire Fee: Fee assessed by Analysis.			
Currency type to be sent: US Dollars	Exchange rate: N/A	Foreign currency amount N/A		Amount to Collect (USD): \$215,000.00			
Recipient Account Informat Account Name: Squirrels LLC	tion						
Street Address:		Vecorint pirmspet.					
		City:	State	: Zip:	Country:		
Text to Recipient:							
vendor payment							
Receiving Bank Information Bank Name:	n	- 42/40/40/5° - 1	AL AUTHORISE COMMON THE STATE OF THE STATE O		CALCULATION OF THE PROPERTY OF		
JPMorgan Chase Bank, National Association	n				<u> </u>		
Street Address: 100 E MAIN ST	Bank ABA/SWIFT Code: 04400037						
TVV E INI INI E .		City:	State	e: Zip: 43113	Country: USA		
Intermediary Bank Name:		CIRCLEVILLE	<u> </u>	43113	- OJI		
Street Address:		Intermediary Bank ABA:					
		City:	State	e: Zip:	Country:		
Text to Receiving Bank:							







BB&T Wire Transfer Operations



ALLMINE INC 9900 CORPORATE CAMPUS DR STE 3000 KY 40223-4060 LOUISVILLE

We have completed this wire transfer request. Your BB&T account has been debited for the net amount shown below.

TRN DATE

20180613

TRN NUM

00008979

AMOUNT

98,000,00

ACCOUNT # DDA - 7242

REFERENCE #

VENDOR PAYMENT 06/13/2018

DATE

14:33:43

TIME

ORIGINATOR

THOMAS SENSEL

9121 WASHINGTON TRACE RD

CALIFORNIA KY 41007-9093 US

BENEFICIARY BANK

JPMORGAN CHASE BANK, NA

BENEFICIARY BANK #

044000037

BENEFICIARY NAME

SQUIRRELS LLC

BENEFICIARY ACCOUNT

ORIGINATING BANK INFORMATION

Thank you for banking with BB&T. Please contact your local BB&T financial center or call 1-800-BANK BBT (1-800-226-5228) for questions regarding this wire transfer.

BB&T, Member FDIC.

Case: 5:22-cv-01454-CEH Doc #: 58-3 Filed: 03/03/25 4 of 7. PageID #: 438 BB&T

Outgoing Wire Transfer Request Agreement

Date 13-JUN-2018	Branci	NORTHERN KENTUCKY-2773112			Phone #_(859)814-2383
Client type C	Wire 1	Fransfer Amount \$ 98000.00			Repetitive #
C = Client Acct Charged F	F ≃ Fina	ncial		_	Case ID <u>D-20180613-748</u>
Application CHECKI	ING	Debit Accour	it ,		
Originator Na	ame	THOMAS SENSEL	, i		
Ad	ldress	9121 WASHINGTON TRACE RD			
		CALIFORNIA KY 41007-9093 US	•		
<u>ID P</u>	roof				
		MAN SPACE CO.	D		
Intermediary Bank Name			<u>Benefici</u> Name		<u>BNK</u> ICHASE OHIO
A .1.1			Address	JPM:	IORGAN CHASE BANK, NA
		Management of the second secon	,,,,,,,,,		LUMBUS OH
Country			Country	US	
ABA / Routing			•		044000037
	ame	SQUIRRELS LLC	AUA / IX	Jaung	011000007
		219 NORTH MAIN ST			
AC	Juless	NORTH CANTON OH 44720			
		NORTH CANTON OF 44720			
	ссоп	LINITED STATES		······	
	ountry	UNITED STATES VENDOR PAYMENT			
Originator Reference		VL(NDOK) ATMILIN			
Originator to Beneficiary [Purpose]	Info				
			·		
Bank to Bank Info			,		
	,				
					rmation from the wire transfer originator and
beneficiaries. E send the wire v	BB&T C ia debi	clients who present funds from an ou It of said account.	itside source	are i	requested to deposit funds to their account and
		EE FOLLOWING PAGES FOR ADDIT			
		ormation concerning this wire tran following pages of this agreement.		ect an	d agree to be bound to the Terms and
			 		
Cilent Acknor	wledge	ment:			
		Did you receive wire instructions via e	mail/fex?		YES 🗸 NO
		If VEO house very self-defeat the side has			
		If YES, have you validated the wire inst	ructions?	<u> </u>	YES NO
THOMAS SENSEL			~/>	<u> </u>	
Client / Authorized Comp		presentative	Client / A	uthoriz	red Company Representative Signature
KYLE J BROWN / C1 Bank Associate	17061		13-JUN		
Sum Flooding			Date		
Requested By (if applicat	ble)		Date		the state of the s
8115 (1111)		Boulaton Date	Atimita nos		

Revision Date: August 2016





BB&T Wire Transfer Operations



ALLMINE INC 9900 CORPORATE CAMPUS DR STE 3000 LOUISVILLE KY 40223-4060

We have completed this wire transfer request. Your BB&T account has been debited for the net amount shown below.

TRN DATE

20180615

TRN NUM 00011054

AMOUNT

60,000.00

ACCOUNT # DDA - 7242

REFERENCE #

DATE TIME 06/15/2018

13:44:14

ORIGINATOR

THOMAS SENSEL

9121 WASHINGTON TRACE RD

CALIFORNIA KY 41007-9093 US

BENEFICIARY BANK

JPMORGAN CHASE BANK, NA 044000037

BENEFICIARY BANK #

BENEFICIARY NAME

BENEFICIARY ACCOUNT

ORIGINATOR TO BENE INFO

ORIGINATING BANK INFORMATION

VENDOR PAYMENT

SQUIRRELS LLC

Thank you for banking with BB&T. Please contact your local BB&T financial center or call 1-800-BANK BBT (1-800-226-5228) for questions regarding this wire transfer.

Case: 5:22-cv-01454-CEH Doc #: 58-3 Filed: 03/03/25 6 of 7. PageID #: 440

Outgoing Wire Transfer Request Agreement

Date 15-JUN-2018 B	ranch NORTHERN KENTUCKY-2773112		Phone # _(859)814-2383
Client type _C V	Vire Transfer Amount \$ 60000.00		Repetitive #
C = Client Acct Charged F =	Financial	••	Case ID D-20180615-784
Application CHECKING	G Debit Accou	nt .	
<u>Originator</u> Nam	e THOMAS SENSEL		Control of the Contro
	ess 9121 WASHINGTON TRACE RD		
,,,,	CALIFORNIA KY 41007-9093 US		
<u>ID Pro</u>	of		
Into-position (Donle			
Intermediary Bank Name		<u>Benerici</u> Name	ary Bank JPMCHASE OHIO
Address			JPMORGAN CHASE BANK, NA
	, , , , , , , , , , , , , , , , , , , ,	. 1021 040	COLUMBUS OH
Country		Country	US
ABA / Routing	, miles and a second se	•	outing044000037
Beneficiary Nam	e SQUIRRELS LLC	71077771	
	ess 219 NORTH MAIN ST		
	NORTH CANTON OH 44720		
Acco			
Cour			
Originator Reference			
Originator to Beneficiary Inf	o VENDOR PAYMENT		
[Purpose]	0 PERBORT ATMENT		
	and the state of t		
Bank to Bank Info			

Note: The Bank Spare	are Ant manufacture and identification		
beneficiaries, BB8	by Act requires proper identification a AT clients who present funds from an or	ina compiete utside source	information from the wire transfer originator and are requested to deposit funds to their account and
send the wire via	debit of sald account.		
I certify that the	SEE FOLLOWING PAGES FOR ADDIT		ITRACTUAL WIRE INFORMATION ect and agree to be bound to the Terms and
Conditions on t	he following pages of this agreement	,	and agree to be bound to the Terms and
Client Acknowle	dgement:		
	Did you receive wire instructions via e	emall/fax?	YES V NO
	If YES, have you validated the wire inst	tructions?	YES NO /
THOMAS SENSEL	· · · · · · · · · · · · · · · · · · ·		
Client / Authorized Company KYLE J BROWN / C170		Client/ A	Ithorized Company Representative Signature
Bank Associate	· · · · · · · · · · · · · · · · · · ·	Date	2010
Requested By (if applicable)		D.L	
madester by (it applicable)		Date	

8116 (1111)

Revision Date: August 2016

Case: 5:22-cv-01454-CEH Doc #: 58-3 Filed: 03/03/25 7 of 7. PageID #: 441

Wire Transfer Outgoing Request



Wire Transfer Sender Inforr	nation				CLESCONUM.				
Sender Name:									
THOMAS A SENSEL	AN TAXABLE DAY								
Account Name:	Street Address;	Street Address: 9121 WASHINGTON TRACE RD							
ALLMINE INC.	JIZI WAJAMON	ON MARCE NO							
City:	State:	Zip:	Country:			Daytime Phone:			
CALIFORNIA	кү	41007-9093	USA			310-430-8567			
Primary ID Type:	ID Issuer:	ID Number:		ID Issue Date:		ID Exp:			
Driver's License	KY			06/18/2014					
Secondary ID Type:	ID Issuer:	ID Number: XXXXXXXXXXXXX71	1	ID Issue Date:		ID Exp: 06/30/2021			
	nase or Bank Issued ATM Card Chase					007,307,202,1			
Comments:									
					AND THE PROPERTY OF THE PROPER				
Wire Transfer Information		Lizz in Carr		hu	ire Type:				
Request Date:	Request time: 04:31:31PM Eastern time	Effective date: 06/20/2018			omestic				
06/20/2018 8-8# Account #:	Debit Account Type:	Available balance:		L	ire Amount	US dollars):			
	PLAT BUS CHECKING	\$472,726.13				\$350,000.00			
Qualiforn Agraunt #1	Qualifying Account Type:	Source of funds:			Wire Fee:				
Qualifying Account #:	Quamying Account type.	Checking		Fee assessed by Analysis.					
Currency type to be sent:	Exchange rate:	Foreign currency amount:			Amount to Callect (USD):				
US Dollars	. 771			N/A \$350,000.00					
FX Contract Number:									
	W					2000 - 2 0000 - 1			
Recipient Account Informa	tion								
Account Name:									
Sqirrels LLC									
Street Address;		Account Number:	I						
		233220217			: Zip: Country:				
		City:		State:	Zip:	Caulity,			
			V						
Text to Recipient:									
						agas "" " " " " " " " " " " " " " " " " "			
Receiving Bank Informatio	n								
Bank Name:									
JPMorgan Chase Bank, National Association	on								
Street Address:		Bank ABA/SWIFT C	ode:						
100 E MAIN ST		044000037		[[[]]]		Country:			
		City;		State:	Zip:	USA			
		CIRCLEVILLE		он	43113	USA			
Intermediary Bank Name:									
Street Address:		Intermediary Bank	Intermediary Bank ABA:						
				State:	Zip:	Country:			
ļ		City:		State.	EH).	Coonay			
	Marcon and the state of the sta								
Text to Receiving Bank:									
1									

